

Fig. 1

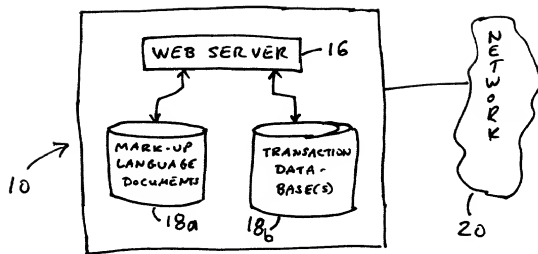


Fig. 2

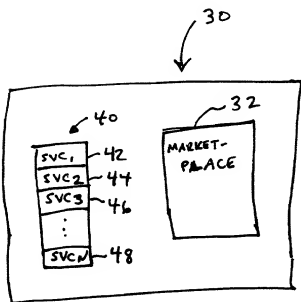


Fig. 3

## Register

Register as   
Company   
Department   
Address form ☐ Ms ☒ Mr  
Name   
First name   
Title   
Position   
Telephone   
Telefax   
E-mail   
Street and No.  
(or P.O. Box)   
Postal Code   
Town/city   
Country   
Other country  
(not in list)   
User Name   
Password   
Confirm  
Password

☐ I have read the terms of business and agree to them

Fig. 4

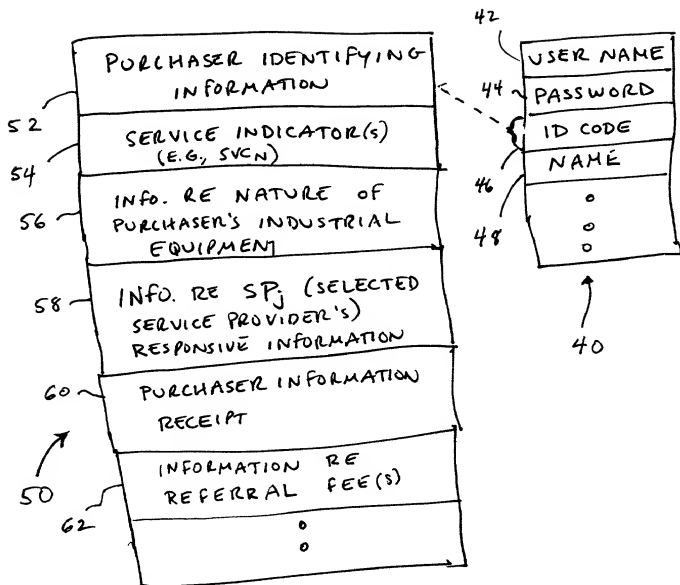


Fig. 5

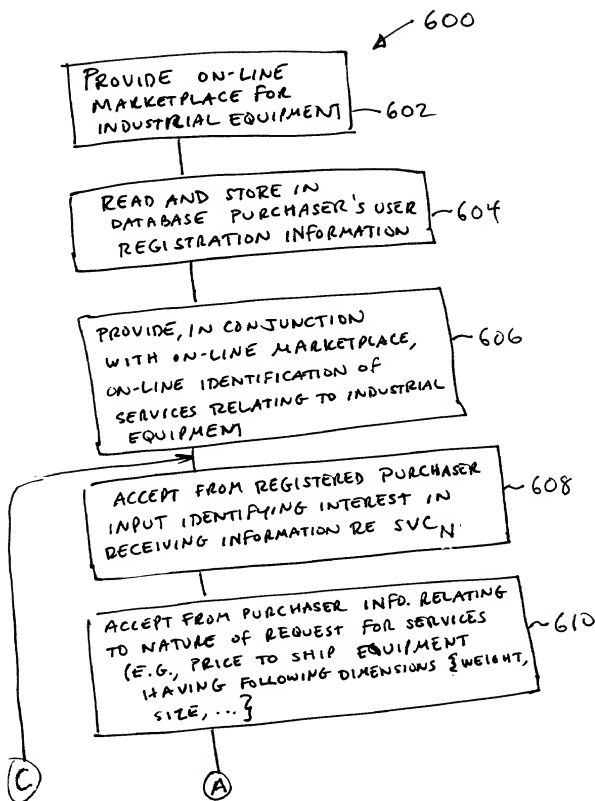


Fig. 6A

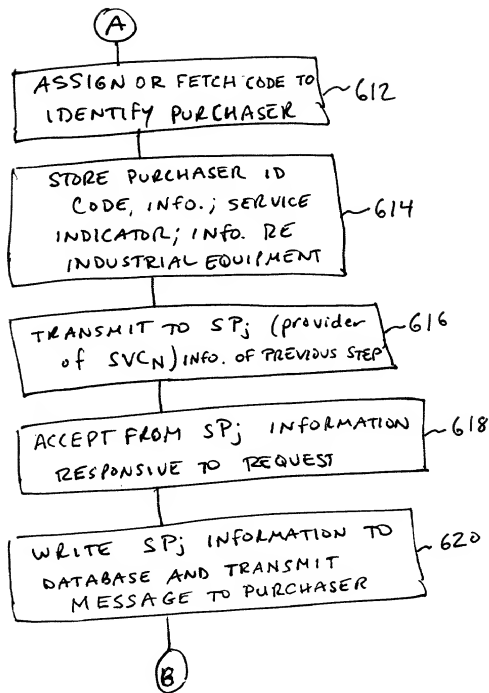


Fig. 6B

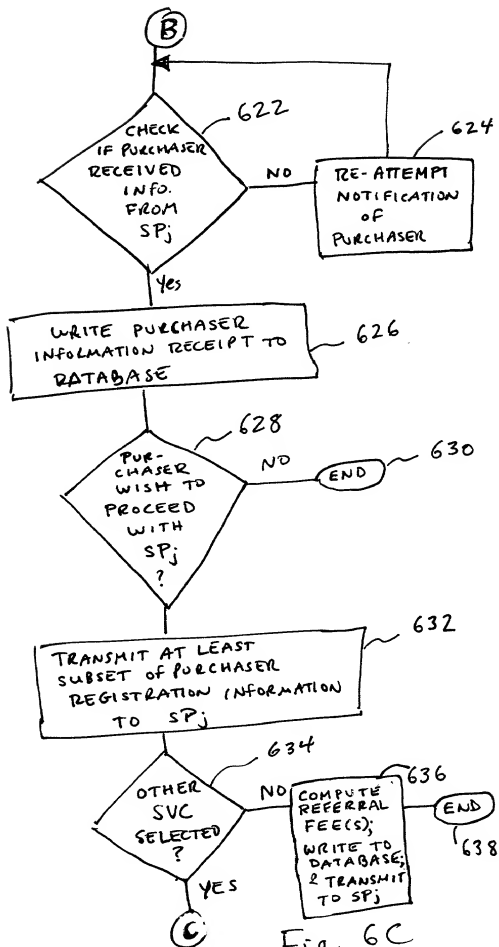


Fig. 6C

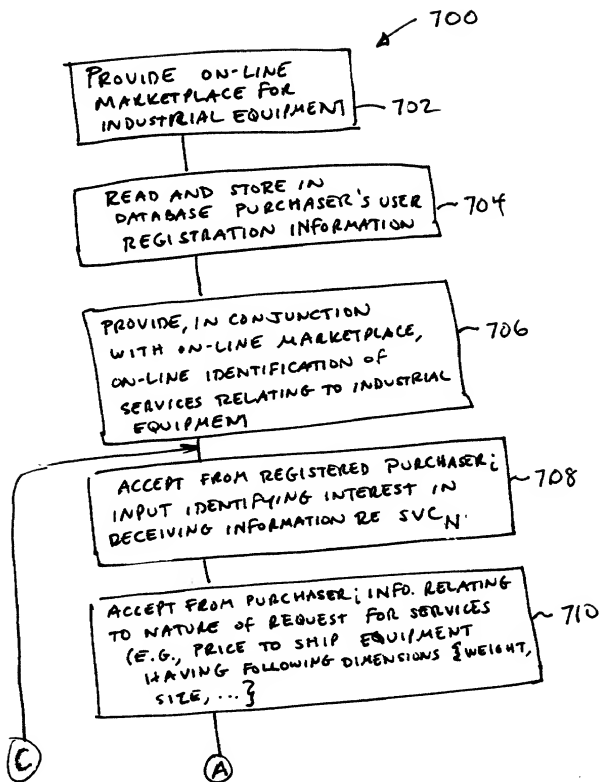


Fig. 7A



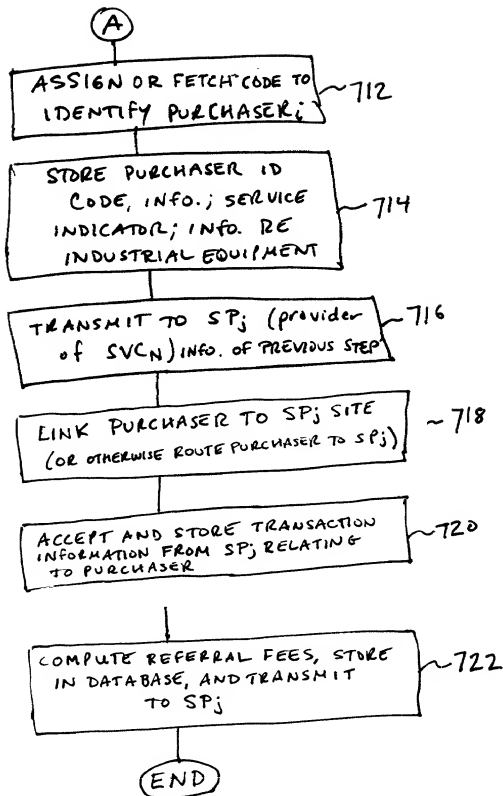


Fig. 7B

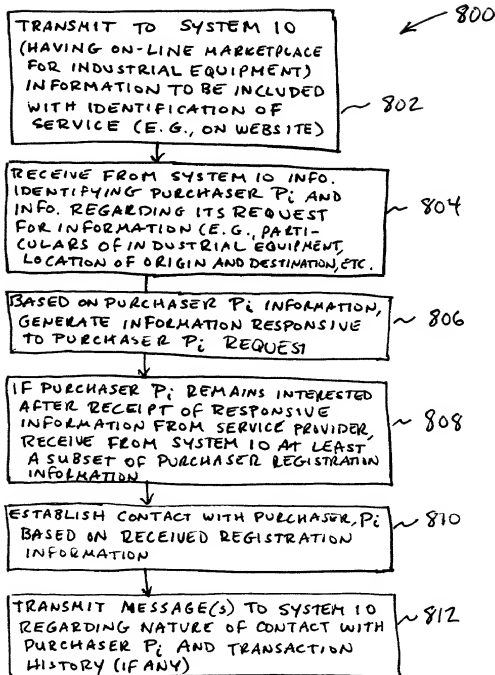


FIG. 8